

Overflow Winter Shelter TB Project Report

April 2005

The Utah Department of Health's Tuberculosis Control/Refugee Health Program recently completed the Tuberculosis (TB) Surveillance Project at the Community Winter Emergency Shelter (CWES) in Midvale, UT. The TB Control/Refugee Health Program, in coordination with the Road Home Homeless Shelter and the Fourth Street Clinic, ensured testing and treatment (if necessary) for as many people as possible. To accommodate those residents who would otherwise be on the streets, the CWES is open during Utah's cold winter months. Tuberculin skin tests (TST's) are placed to identify those residents who have been infected with latent TB infection or active TB disease. New residents have a TST placed as part of a targeted testing project to protect the health of all shelter residents.

The shelter opened November 1, 2004 and closed March 31, 2005. The TB Control/Refugee Health Program staff and volunteers placed and read TST's during this time. Tests were placed on Monday and Tuesday nights. Residents returned Wednesday and Thursday nights to have their results read. Residents with positive TST's were referred to Fourth Street Clinic for further evaluation and follow up. To encourage residents to return for their results, incentives including socks, suckers, and \$5 food coupons were offered.

A total of 429 TST's were placed and 309 returned for their results. Nineteen (19) positive skin tests and 10 negative chest x-rays were reported. There were no suspected active cases. No active cases were identified.

The Tuberculosis Control Program also collaborated with the Nevada Department of Health to follow up on medical release information requested for one gentleman who claimed to have had a recent test. They had record of the patient but his previous TST was outdated. The Adult Detention Center was also contacted for information regarding test results for residents that had just been released from the center.

Testing at the CWES has proven effective in identifying and treating latent and active TB in the high risk, homeless population of Salt Lake City, Utah.